

How to Submit a Partial Payment Request in Accordance with Executive Order 2020-11

Executive Order 2020-11 allows for “partial payment” requests to be submitted by an attorney for their court appointed work. The table below displays fifty percent (50%) of the threshold amount permitted for these partial payment requests.

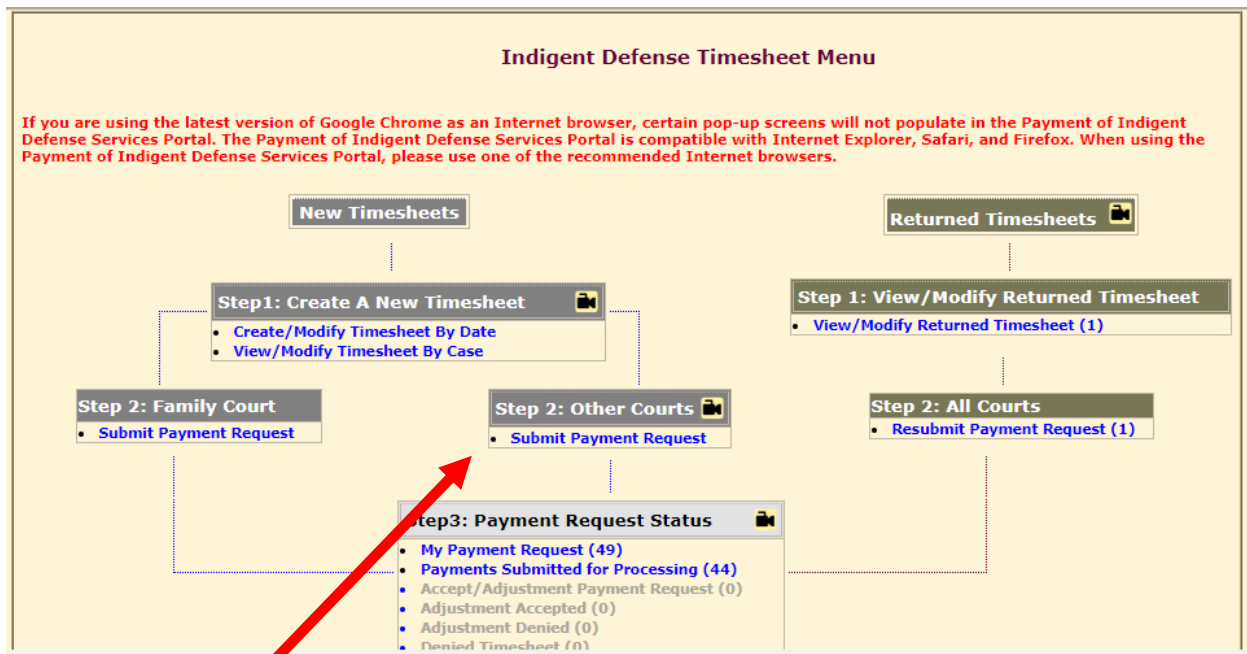
| Court | Panel Type | Threshold | Partial Payment Request Threshold Under EO 2020-11 |
|-----------------------|--|------------------|---|
| Supreme | | | |
| | Criminal Appeal | \$ 5,200.00 | \$ 2,600.00 |
| | Miscellaneous Appeals & Petitions | 5,200.00 | 2,600.00 |
| | Post-Conviction Relief Appeal | 5,200.00 | 2,600.00 |
| | Termination of Parental Rights Appeals | 5,200.00 | 2,600.00 |
| Superior | | | |
| | Murder | \$ 30,000.00 | \$ 15,000.00 |
| | Murder - Post-Conviction Relief | 7,500.00 | 3,750.00 |
| | Class 1 Felony | 10,000.00 | 5,000.00 |
| | Class 1 Felony - Post-conviction Relief | 5,500.00 | 2,750.00 |
| | Class 2 Felony | 5,000.00 | 2,500.00 |
| | Class 2 Felony - Post-Conviction Relief | 3,500.00 | 1,750.00 |
| | Misdemeanor | 1,500.00 | 750.00 |
| | Misdemeanor - Post-Conviction Relief | 750.00 | 375.00 |
| | Sexual Violent Predator | 1,500.00 | 750.00 |
| | Violation of Court Order for Payment of Fines, Costs, and/or Restitution | 1,500.00 | 750.00 |
| District Court | | | |
| | Class 1 Felony | \$ 10,000.00 | \$ 5,000.00 |
| | Class 2 Felony | 5,000.00 | 2,500.00 |
| | Driving Under Influence of Liquor or Drugs | 2,500.00 | 1,250.00 |
| | Driving Under Influence of Liquor or Drugs - Post-Conviction Relief | 750.00 | 375.00 |
| | Misdemeanor | 1,800.00 | 900.00 |
| | Misdemeanor - Post-Conviction Relief | 750.00 | 375.00 |
| | Violation of Court Order for Payment of Fines, Costs, and/or Restitution | 1,500.00 | 750.00 |

If the request exceeds the fifty percent (50%) amount, the attorney should submit the full amount and an adjustment will be made by the Office of Finance and Budget. There will be a note sent to the attorney that explains the reduction and the amount. The attorney is permitted to seek payment for the reduced expenses at the point of disposition of the case.

The subsequent pages of this document serve as a procedure and gives instructions on how to seek payment under Executive Order 2020-11.

How to Submit a Partial Payment Request in Accordance with Executive Order 2020-11

Step 1: Start at the Indigent Defense Timesheet Menu page.



Step 2: Select



Step 3: The screen below will open, scroll with your mouse and select the

Case Number:* --Select-- drop down menu.

The 'Submit Payment Request' form includes a warning about the new case management system. It features a 'Return to Indigent Defense Timesheet Menu' button and a form with fields for 'Case Number:*' (a dropdown menu), 'Case Description:', 'Reason For Payment Request:*' (a dropdown menu), 'Judge:' (a dropdown menu), and 'Reason Date:*' (a date field). Below these is a 'Payment Details' section with 'Payee:*' (radio buttons for 'Direct' and 'Law Firm'), 'Social Security Number:', and a note to click 'Update' to change payee type and taxpayer identification number. At the bottom are 'Submit' and 'Reset' buttons. A red arrow points from the 'Case Number' dropdown in the previous step to this field.

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Step 4: A dropdown list of all of the cases your presently have entered timesheets on will appear. Select the case number you would like to submit for a partial payment request, as displayed below:

Submit Payment Request

During the implementation of our new case management system across all of our courts, you must wait twenty-four (24) hours from completion of the case to submit your timesheet to allow our systems to update and process information.

[Return to Indigent Defense Timesheet Menu](#)

Case Number:* [View/Modify](#)

Case Description: State of Rhode Island v. ALLEN HANSON Reason For Payment Request:*

Judge:* Reason Date:*
(MM/DD/YYYY)

Payment Details

Payee:* ☒ Direct ☐ Law Firm

Social Security Number:

Please click on **Update** to change the payee type and taxpayer identification number.

Fields marked with * are mandatory.

Step 5: Scroll with your mouse and select the Judge: drop down menu.

Submit Payment Request

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[Return to Indigent Defense Timesheet Menu](#)

Case Number:* [View/Modify](#)

Case Description: State of Rhode Island v. ALLEN HANSON Reason For Payment Request:*

Judge:* Reason Date:*
(MM/DD/YYYY)

Payment Details

Payee:* ☒ Direct ☐ Law Firm

Social Security Number:

Please click on **Update** to change the payee type and taxpayer identification number.

Fields marked with * are mandatory.

How to Submit a Partial Payment Request in Accordance with Executive Order 2020-11

Step 6: A dropdown list of all the judges and magistrates you have listed on the case you previously selected will appear. Please select the judge or magistrate who most recently was involved in this matter.

Submit Payment Request

During the implementation of our new case management system across all of our courts, you must wait twenty-four (24) hours from completion of the case to submit your timesheet to allow our systems to update and process information.

[Return to Indigent Defense Timesheet Menu](#)

Case Number:* K2-2017-0096A [View/Modify](#)

Case Description: State of Rhode Island v. ALLEN HANSON Reason For Payment Request:* --Select--

Judge:* Procaccini Reason Date:* (MM/DD/YYYY)

Payment Details

Payee:* ☒ Direct ☐ Law Firm

Social Security Number:

Please click on **Update** to change the payee type and taxpayer identification number.

Fields marked with * are mandatory. [Submit](#) [Reset](#)

Step 7: Scroll with your mouse and select the

Reason For Payment Request:* --Select-- drop down menu.

Submit Payment Request

During the implementation of our new case management system across all of our courts, you must wait twenty-four (24) hours from completion of the case to submit your timesheet to allow our systems to update and process information.

[Return to Indigent Defense Timesheet Menu](#)

Case Number:* K2-2017-0096A [View/Modify](#)

Case Description: State of Rhode Island v. ALLEN HANSON Reason For Payment Request:* --Select--

Judge:* Procaccini Reason Date:* (MM/DD/YYYY)

Payment Details

Payee:* ☒ Direct ☐ Law Firm

Social Security Number:

Please click on **Update** to change the payee type and taxpayer identification number.

Fields marked with * are mandatory. [Submit](#) [Reset](#)

How to Submit a Partial Payment Request in Accordance with Executive Order 2020-11

Step 8: A dropdown list that includes the following options will appear:

Attorney Substituted

Case Disposed

Courtroom Assignment

Expenses and/or Investigation Fees

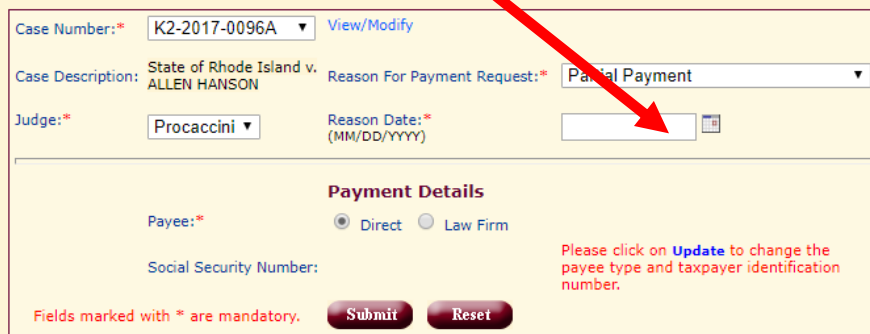
Partial Payment

Service Discontinued

Please select **Partial Payment**

During the implementation of our new case management system across all of our courts, you must wait twenty-four (24) hours from completion of the case to submit your timesheet to allow our systems to update and process information.

[Return to Indigent Defense Timesheet Menu](#)



Case Number:* K2-2017-0096A [View/Modify](#)

Case Description: State of Rhode Island v. ALLEN HANSON Reason For Payment Request:* Partial Payment

Judge:* Procaccini Reason Date:* (MM/DD/YYYY)

Payment Details

Payee:* ☒ Direct ☐ Law Firm

Social Security Number:

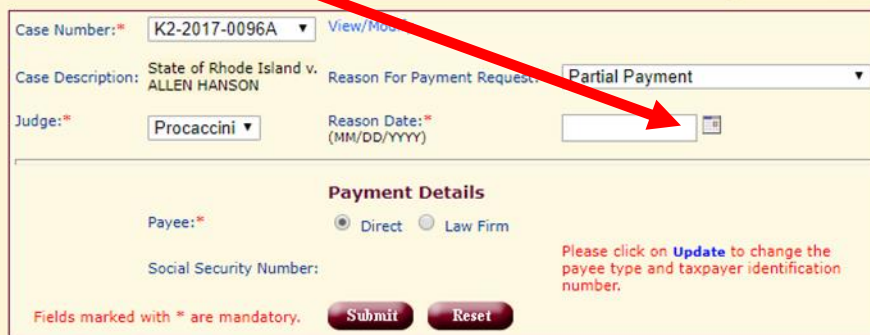
Please click on **Update** to change the payee type and taxpayer identification number.

Fields marked with * are mandatory. [Submit](#) [Reset](#)

Step 9: Scroll with your mouse and select the Reason Date: (MM/DD/YYYY) calendar icon.

During the implementation of our new case management system across all of our courts, you must wait twenty-four (24) hours from completion of the case to submit your timesheet to allow our systems to update and process information.

[Return to Indigent Defense Timesheet Menu](#)



Case Number:* K2-2017-0096A [View/Modify](#)

Case Description: State of Rhode Island v. ALLEN HANSON Reason For Payment Request:* Partial Payment

Judge:* Procaccini Reason Date:* (MM/DD/YYYY)

Payment Details

Payee:* ☒ Direct ☐ Law Firm

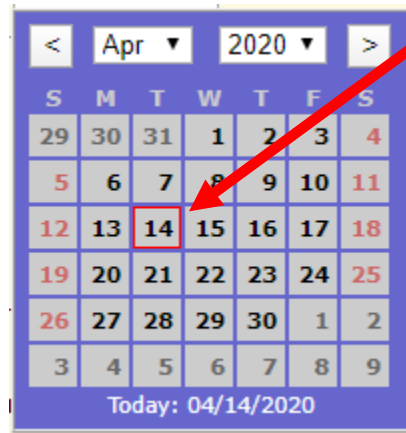
Social Security Number:

Please click on **Update** to change the payee type and taxpayer identification number.

Fields marked with * are mandatory. [Submit](#) [Reset](#)

How to Submit a Partial Payment Request in Accordance with Executive Order 2020-11

Step 10: A calendar will appear and select today's date, the date of submission.



Step 11: The date will populate in the appropriate box.

Submit Payment Request

During the implementation of our new case management system across all of our courts, you must wait twenty-four (24) hours from completion of the case to submit your timesheet to allow our systems to update and process information.

[Return to Indigent Defense Timesheet Menu](#)

| | | |
|------------------------------|---------------------------------------|--------------------------------------|
| Case Number:* | K2-2017-0096A | View/Modify |
| Case Description: | State of Rhode Island v. ALLEN HANSON | |
| Reason For Payment Request:* | Partial Payment | |
| Judge:* | Procaccini | Reason Date:*(MM/DD/YYYY) 04/14/2020 |

Payment Details

Payee:*

☒ Direct ☐ Law Firm

Social Security Number:

Please click on **Update** to change the payee type and taxpayer identification number.

Fields marked with * are mandatory.

Submit **Reset**

Step 12: Once all of the required fields are filled in completely, please click on the **Submit** button to submit your partial payment request.

Step 13: If your partial payment request is submitted successfully this alert will appear.

Payment request was submitted successfully.

Submit Payment Request

During the implementation of our new case management system across all of our courts, you must wait twenty-four (24) hours from completion of the case to submit your timesheet to allow our systems to update and process information.